

Tailored Plan Auto-enrollment & Opt-in Scenarios

May 2023

To ensure beneficiaries can seamlessly receive care on day one, the North Carolina Department of Health and Human Services (NCDHHS) is delaying the implementation of the NC Medicaid Managed Care Behavioral Health and Intellectual/ Developmental Disabilities Tailored Plans (Tailored Plans). Tailored Plan launch was scheduled for Oct. 1, 2023, but will now go forward at a date still to be determined.

Contents

Page	Topic
3	Tailored Plan Beneficiary Enrollment Diagram
4	Tailored Plan Auto-enrollment Algorithm
6	Scenario 1A – Tailored Plan Beneficiary Auto-enrolled
7	Scenario 1B – Tailored Plan Beneficiary Auto-enrolled: Choice Period, Does not actively select a PCP
8	Scenario 2 – Tailored Plan Beneficiary Auto-enrolled: Choice Period, Actively selects a PCP
9	Scenario 3 – Tailored Plan Beneficiary Auto-enrolled: Choice Period, Selects a Standard Plan
11	Scenario 4 – Tailored Plan Beneficiary Opt-in: Choice Period, Does not select a Tailored Plan
13	Scenario 5 – Tailored Plan Beneficiary Auto-enrolled: Newly Receiving TCM
14	Scenario 6 – Tailored Plan Beneficiary Auto-enrolled: Changing TCM provider

Tailored Plan Beneficiary Enrollment Diagram





Tailored Plan Criteria Review

NC Medicaid identifies beneficiaries who qualify for Tailored Plan based on the 24month lookback period.



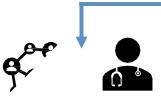
Auto-enrollment

NC Medicaid uses an enrollment algorithm to enroll beneficiaries in a Tailored Plan.



Enrollment Broker Notice

Beneficiary receives information about their Tailored Plan and health care options.



Choice Period

Beneficiaries can contact their **Tailored Plan**:

 Auto-enrolled: Select a primary care provider (PCP).

Beneficiaries can contact the Enrollment Broker:

• **Opt-In:** Choose the Tailored Plan or a different health care option (if applicable).





Auto-assignment

Beneficiaries will be assigned a PCP if they do not actively choose during the choice period





Communicate

Tailored Plans send Welcome Packets and Medicaid ID cards to their beneficiaries. *

^{*} Beneficiaries who are a part of the opt-in population and do not enroll in a Tailored Plan will receive Welcome Packets and ID cards from the health care option they selected.

Tailored Plan Auto-enrollment Algorithm

1

Tailored Plan Criteria Review

Does the beneficiary meet Tailored Plan enrollment criteria?

1- Determines if the beneficiary needs certain services only offered by Tailored Plans (e.g., TBI/Innovations Waiver services).

2

Administrative County

Which county manages the beneficiary's Medicaid case?

2- Determines which Tailored Plan the beneficiary will be auto-enrolled in. There is only one Tailored Plan per county. Beneficiaries cannot choose a different Tailored Plan.

3 Special Population Considerations

Is the beneficiary in a special population?

3- Determines if the beneficiary is part of a special population and should not be auto-enrolled in Tailored Plan (e.g., federally recognized tribal members, dual eligibles).



Beneficiary is auto-enrolled in a Tailored Plan.



Tailored Plan Auto-enrollment Scenarios



Scenario 1A: Tailored Plan Beneficiary: Auto-enrolled

Barbara is a Medicaid beneficiary who is enrolled in NC Medicaid Direct. She lives in Wake County and her Medicaid case is managed by Wake County. She currently receives services through the Innovations Waiver. Barbara receives a notice from the NC Medicaid Enrollment Broker letting her know she has been enrolled in Alliance Health (Tailored Plan) and will begin receiving health care services from Alliance Health (Tailored Plan)

Tailored Plan Criteria Review

Barbara was determined to be eligible for Tailored Plan because she is enrolled in NC Innovations Waiver.

Administrative County

Barbara's Medicaid is managed by Wake County.

Special Population

Barbara is not part of a special population.

4 Auto-enrollment

Barbara is enrolled in Alliance Health (Tailored Plan).

Barbara receives a notice from the NC Medicaid Enrollment Broker.

Barbara will be able to choose her primary care provider (PCP) through Alliance Health (Tailored Plan).

Barbara will not lose her Innovations Waiver services (slot) due to enrollment in the Tailored Plan.



Scenario 1B: Tailored Plan Beneficiary: Auto-assignment & Choice Period

Does not choose a PCP during the Choice Period

Barbara is auto-enrolled in Alliance Health (Tailored Plan). She got a letter in the mail from the Enrollment Broker letting her know about her new Tailored Plan and to select a PCP. She did not actively choose one before the auto-assignment date.

Primary Care Provider

Barbara will be auto-assigned to a PCP.

2 Tailored Care Management Provider

Barbara has been receiving Tailored Care Management (TCM) through her LME/MCO since Dec. 1, 2022. There are no changes to her TCM provider, but Barbara can call her Tailored Plan to change her TCM provider if desired.

3 Welcome Packet

Barbara receives a Welcome
Packet and Medicaid ID card from
Alliance Health (Tailored Plan) with
her PCP and Tailored Care
Management provider information.

If she wants to change her PCP or TCM provider, Barbara can call her Tailored Plan at the number listed on her Medicaid ID card.



Scenario 2: Tailored Plan Beneficiary: Auto-enrolled & Choice Period Chooses a PCP/TCM provider during the Choice Period

Terry is auto-enrolled in Eastpointe (Tailored Plan). She received a notice in the mail from the NC Medicaid Enrollment Broker about choosing her PCP. Terry selected her PCP and Tailored Care Management provider.

Primary Care Provider

Terry calls the Enrollment Broker to choose her PCP. The Enrollment Broker refers Terry to Eastpointe (Tailored Plan), letting her know that her health plan can help her choose providers.

Terry calls Eastpointe directly to learn more about the PCPs in Eastpointe's network.

Dr. Wright, Terry's current PCP, is contracted with Eastpointe. Terry chooses Dr. Wright as her PCP.

2 Tailored Care Management Provider

Terry has been receiving Tailored Care Management through her LME/MCO but wants to choose a new TCM provider. Terry calls Eastpointe (Tailored Plan) to learn more about her options for TCM providers.

Eastpointe (Tailored Plan) educates Terry about TCM providers that are in their network and Terry chooses the provider she likes.

Welcome Packet

Terry receives a Welcome Packet and Medicaid ID card from Eastpointe (Tailored Plan) with her PCP and TCM provider information.

If she wants to change her PCP or TCM provider, Terry can call her Tailored Plan at the number listed on her Medicaid ID card.



Scenario 3: Tailored Plan Beneficiary: Auto-Enrollment and Choice Period Chooses a Standard Plan during the Choice Period

Jeremy is a Medicaid beneficiary who is enrolled in Healthy Blue. Jeremy receives a notice from the NC Medicaid Enrollment Broker letting him know he has been auto-enrolled in Sandhills Center (Tailored Plan) and will begin receiving health care services from Sandhills Center (Tailored Plan), unless he chooses a different health plan. Jeremy wants to stay enrolled in Healthy Blue.

Tailored Plan Criteria Review

Jeremy is determined to be eligible for Tailored Plan because he has a diagnosis of Bi-polar and received partial hospitalization (an enhanced behavioral health service) during the 24-month lookback period.

2 Administrative County

Jeremy's Medicaid is managed by Harnett County.

Special Population

Jeremy is not part of a special population.

4 Auto-Enrollment

Jeremy is enrolled in Sandhills Center (Tailored Plan).

Jeremy receives a notice from the NC Medicaid Enrollment Broker.

6 Choice Period

Jeremy contacts the NC Medicaid Enrollment Broker, to let them know he wants to stay enrolled in Healthy Blue.

The NC Medicaid Enrollment Broker educates Jeremy on the Tailored Plan and Standard Plan services and provides choice counseling. Jeremy confirms his decision to re-enroll in Healthy Blue.



Tailored Plan
Opt-in Scenarios



Scenario 4: Tailored Plan Beneficiary: Opt-in Stays in current health care option during Choice Period

Tyler is a Medicaid beneficiary who is enrolled in the EBCI Tribal Option. He currently receives behavioral health services. He receives a notice from the NC Medicaid Enrollment Broker letting him know there is a new health plan, Tailored Plan, available to him. Tyler lives in Cherokee County and his Medicaid case is managed by Graham County.

Tailored Plan Criteria Review

Tyler is determined to be eligible for Tailored Plan during the 24-month lookback period because he receives inpatient behavioral health services.

Tyler's Medicaid case is managed by Graham County.

Tyler is a federally recognized tribal member who lives in Cherokee County.

Opt-In

Tyler is not auto-enrolled in a Tailored Plan but can choose a Tailored Plan (Vaya Health).

Tyler receives a notice from the NC Medicaid Enrollment Broker.

Choice Period

Tyler contacts the Enrollment Broker to learn more about Vaya Health (Tailored Plan). Tyler decides to stay enrolled in the EBCI Tribal Option.



Tailored Plan
TCM Scenarios



Scenario 5: Tailored Plan Beneficiary: Auto-enrolled and newly receiving TCM

Mark is enrolled in NC Medicaid Direct. He currently receives enhanced behavioral health services. He receives a notice from the NC Medicaid Enrollment Broker letting him know he will be enrolled in the Tailored Plan. Mark is not currently receiving TCM services through his LME/MCO. Mark lives in Graham County and his Medicaid case is managed by Graham County.

Tailored Plan Criteria Review

Mark was determined to be eligible for Tailored Plan because he receives inpatient behavioral health services.

Mark's Medicaid case is managed by Graham County.

Mark is not part of special population.

5 Welcome Packet

Vaya Health (Tailored Plan) will send Mark his Medicaid ID card, Member Handbook(s) and welcome letter with information about the Tailored Plan. Mark's PCP will be listed on his Medicaid ID card and his TCM provider will be on the TCM assignment letter.

4 Auto Enrollment

Mark is auto-enrolled in Vaya Health (Tailored Plan).

Mark receives a notice from the NC Medicaid Enrollment Broker.

Mark will be able to choose his PCP and TCM provider through Vaya Health (Tailored Plan).



Scenario 6: Tailored Plan Beneficiary: Auto-enrolled and Changing TCM provider

Molly is a Medicaid beneficiary who is enrolled in NC Medicaid Direct. She is receiving Innovations Waiver services. Molly received a letter from the LME/MCO with her Tailored Care Management provider as her current waiver care coordinator. Molly receives TCM services but wants to change her TCM provider. The Enrollment Broker sends her a letter letting her know she is enrolled in the Tailored Plan.

Molly will continue to receive TCM from the Tailored Plan after enrollment.

Tailored Plan Criteria Review

Molly is determined to be eligible for Tailored Plan during the 24month lookback period because she is on the Innovations Waiver.

2 TCM Assignment

Molly was assigned her current care coordinator as her TCM provider through the LME/MCO.

3 Auto Enrollment

Molly is auto-enrolled in the Tailored Plan.

Molly receives a notice from the NC Medicaid Enrollment Broker.

6 Welcome Packet

Molly's Tailored Plan will send her Medicaid ID card, Member Handbook(s) and welcome letter with information about the Tailored Plan. Molly's PCP will be listed on her Medicaid ID card.

4 TCM Choice

Molly calls the LME/MCO to change her TCM provider. The LME/MCO helps her select a new TCM provider and lets her know she will continue to receive TCM and Innovation Waiver services when enrolled in the Tailored Plan.